

### Please type or print with black ink

# NASA COLLEGE SCHOLARSHIP FUND, INC. NASA Johnson Space Center - 2101 NASA Parkway Houston, TX 77058

Application Deadline March 20, 2007

Applicant's name:		
High school grade point average (4.0	Scale):	
SAT Score:(Required; do not put "see attached." Test s	ACT Score:	date, not a combination of tests on different dates.)
College grade point average, if any (	4.0 Scale):	
High school class rank:	out of	students graduating
Number of high school credits:		
Number of college hours, if any:		
Date of high school graduation:		
What field of study does applicant pl	an to pursue?	
Honors/advanced school courses: earned:	List honor, premium, or ad	vanced courses and semester hours credit
High school/College special recogn recognition applicant received for ex scholarships. (Use only space provided;	cellence in high school or o	college work, such as honors, prizes, or

## **Extracurricular Activities:**

<u>School activities:</u> In descending order of importance, list extra-curricular school activities in which applicant participated while in high school or college, such as publications, debating, dramatics, club work, musical organizations, student government, or athletics. Please note if you served as an officer or captain in any activity. (All extracurricular activities must be given on this page. Additional sheets will not be considered.)
Out-of-school activities: In descending order of importance, list out-of-school activities in which applicant participated. (Use only space on this page; additional sheets will not be considered.)

### Please type or print with black ink

your degree after you graduate.
Please provide 3 recommendations from instructors or other knowledgeable individuals not related to the applicant (1 page, letter size). To help with our application sanitation process, please avoid in the text of the recommendation references to gender (he or she), to the school by name or other personal geographical identification. Examples of references are school counselors, teachers, and community leaders. Their statement should recommend you for our merit scholarship and briefly state why they believe you should be selected.  If you are unable to enclose any/all letters of recommendation with your application, please provide the names and addresses of the individuals you have requested recommendations from in the space provided.

Please type or print with black ink

The information below is required, but will NOT be provided to the selection committee.

Sponsor's name (i.e., Parent o	r Legal Guardia	n):
Mr./Mrs./or Miss (circle one):		
Sponsor's home address:		
Office address:		NASA Installation:
Mail Code/Stop:	City:	State: Zip Code:
Office phone: ( )		Home phone: ( )
Dependent's full name:		
Relationship of dependent to S	Sponsor (i.e., so	n, daughter, etc.):
Name, address, and phone nur	mber of applicar	nt's high school(s) and dates attended:
shown on transcripts, please p page 1.) If the high school or responsible for arranging for t transcripts of grades and result	provide an official college will not the school to furnits of your SAT of ensure that the school to	if any) official transcripts. If SAT or ACT scores are not al copy of the report of scores. (Scores must be entered on a provide you with an official transcript, you are mish the Scholarship Committee, at the address given, or ACT. If the student is taking accelerated or honors or school indicates which courses are accelerated or honors of grades.
List colleges (with addresses)	to which applic	ant has been accepted for the next term:
Which college is applicant mo	ost likely to atter	nd?

#### Please type or print with black ink

By executing this application, I hereby authorize the officials of the NASA College Scholarship Fund,

Inc., to contact any educational institutions I have attended for purpose of verifying the data provided and for purposes of gaining additional information of the applicant; was lawfully claimed as an exemption on the U. S. Income (Applicant/Dependent's Full Name) (Full Name) who is/was employed by NASA Tax Return of \_\_\_\_\_ at (Name of NASA Facility) (Organization, Address) NASA Employee Number \_\_\_\_\_ (Social Security Number) If sponsor is not the same as above named individual who claimed applicant on U. S. Income Tax Return, enclosed is proof of Divorce or Legal separation between \_\_\_\_\_ (Claimant) \_\_\_\_\_, Dated \_\_\_\_\_. (Sponsor) Please state relationship of dependent to NASA employee, detailee, or retiree: **Sponsor Eligibility Verification** I certify that I have been employed by NASA since (Month/Year - Must be a minimum of two years as of January 2005) I certify that the information provided in this application is current and correct. Dependent/Applicant's Signature Date

Application may not be considered unless all applicable items are completed and received by the required deadline of March 20, 2007.

Date

Sponsor's Signature